

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 03-0554

First Inventor Yanling Qi

Title METHODS AND STRUCTURE FOR SCSI2 TO SCSI3  
RESERVATION PROTOCOL MAPPING

Express Mail Label No. EL 820325864 US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
- Applicant claims small entity status.  
See 37 CFR 1.27.
- Specification [Total Pages 26]
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 7 ]
- Oath or Declaration [Total Sheets 2 ]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63 (d))  
*(for a continuation/divisional with Box 18 completed)*
  - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:**Commissioner for Patents  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria VA 22313-1450

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  paper
  - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATIONS PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 C.F.R. 3.73(b) Statement  Power of Attorney (*when there is an assignee*)
11.  English Translation Document (*if applicable*)
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s) (*if foreign priority is claimed*)
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: Certificate of Mailing; Additional Return Postcard

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation       Divisional       Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label

24319

or  Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name					
Address					
City	State		Zip Code		
Country	Telephone		Fax		

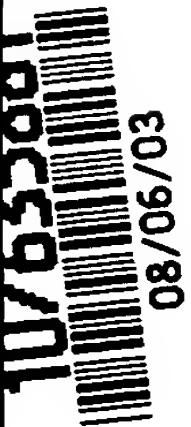
Name (Print/Type)	Daniel N. Fishman	Registration No. (Attorney/Agent)	35,512
-------------------	-------------------	-----------------------------------	--------

Signature		Date	6 AUG 2003
-----------	--	------	------------

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

03917 U.S. PTO  
10/16/03  
08/06/03



# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)  
808

Complete if Known	
Application Number	
Filing Date	Herewith
First Named Inventor	Yanling Qi
Examiner Name	
Art Unit	
Attorney Docket No.	03-0554

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																											
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number      12-2252 Deposit Account Name      LSI Logic Corporation				<b>3. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Fee Code</td><td>Fee (\$)</td><td>Fee Code (\$)</td><td>Fee (\$)</td></tr> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td></tr> </tbody> </table>				Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code (\$)	Fee (\$)	1051	130	2051	65	1052	50	2052	25	1053	130	1053	130	1812	2,520	1812	2,520	1804	920*	1804	920*	1805	1,840*	1805	1,840*	1251	110	2251	55	1252	410	2252	205	1253	930	2253	465	1254	1,450	2254	725	1255	1,970	2255	985	1401	320	2401	160	1402	320	2402	160	1403	280	2403	140	1451	1,510	1451	1,510	1452	110	2452	55	1453	1,300	2453	650	1501	1,300	2501	650	1502	470	2502	235	1503	630	2503	315	1460	130	1460	130	1807	50	1807	50	1806	180	1806	180	8021	40	8021	40	1809	750	2809	375	1810	750	2810	375	1801	750	2801	375	1802	900	1802	900
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																												
Fee Code	Fee (\$)	Fee Code (\$)	Fee (\$)																																																																																																																												
1051	130	2051	65																																																																																																																												
1052	50	2052	25																																																																																																																												
1053	130	1053	130																																																																																																																												
1812	2,520	1812	2,520																																																																																																																												
1804	920*	1804	920*																																																																																																																												
1805	1,840*	1805	1,840*																																																																																																																												
1251	110	2251	55																																																																																																																												
1252	410	2252	205																																																																																																																												
1253	930	2253	465																																																																																																																												
1254	1,450	2254	725																																																																																																																												
1255	1,970	2255	985																																																																																																																												
1401	320	2401	160																																																																																																																												
1402	320	2402	160																																																																																																																												
1403	280	2403	140																																																																																																																												
1451	1,510	1451	1,510																																																																																																																												
1452	110	2452	55																																																																																																																												
1453	1,300	2453	650																																																																																																																												
1501	1,300	2501	650																																																																																																																												
1502	470	2502	235																																																																																																																												
1503	630	2503	315																																																																																																																												
1460	130	1460	130																																																																																																																												
1807	50	1807	50																																																																																																																												
1806	180	1806	180																																																																																																																												
8021	40	8021	40																																																																																																																												
1809	750	2809	375																																																																																																																												
1810	750	2810	375																																																																																																																												
1801	750	2801	375																																																																																																																												
1802	900	1802	900																																																																																																																												
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<b>FEE CALCULATION</b> <b>1. BASIC FILING FEE</b> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Fee Code</td><td>Fee (\$)</td><td>Fee Code (\$)</td><td>Fee (\$)</td></tr> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td></tr> <tr><td colspan="2">SUBTOTAL (1)</td><td colspan="2">(\$ 750)</td></tr> </tbody> </table> <b>2. EXTRA CLAIM FEES</b> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>21</td> <td>-20 **</td> <td>= 0</td> <td>X 18</td> <td>= 18</td> </tr> <tr> <td>3</td> <td>-3 **</td> <td>= 0</td> <td>X 0</td> <td>= 0</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>X 0</td> <td>= 0</td> </tr> <tr> <td colspan="2">Large Entity</td> <td colspan="2">Small Entity</td> <td></td> </tr> <tr> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Description</td> </tr> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="2">SUBTOTAL (2)</td><td colspan="2">(\$ 18)</td><td></td></tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see above</p>				Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code (\$)	Fee (\$)	1001	750	2001	375	1002	330	2002	165	1003	520	2003	260	1004	750	2004	375	1005	160	2005	80	SUBTOTAL (1)		(\$ 750)		Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid	21	-20 **	= 0	X 18	= 18	3	-3 **	= 0	X 0	= 0				X 0	= 0	Large Entity		Small Entity			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	1202	18	2202	9	Claims in excess of 20	1201	84	2201	42	Independent claims in excess of 3	1203	280	2203	140	Multiple dependent claim, if not paid	1204	84	2204	42	** Reissue independent claims over original patent	1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)		(\$ 18)																														
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																												
Fee Code	Fee (\$)	Fee Code (\$)	Fee (\$)																																																																																																																												
1001	750	2001	375																																																																																																																												
1002	330	2002	165																																																																																																																												
1003	520	2003	260																																																																																																																												
1004	750	2004	375																																																																																																																												
1005	160	2005	80																																																																																																																												
SUBTOTAL (1)		(\$ 750)																																																																																																																													
Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid																																																																																																																											
21	-20 **	= 0	X 18	= 18																																																																																																																											
3	-3 **	= 0	X 0	= 0																																																																																																																											
			X 0	= 0																																																																																																																											
Large Entity		Small Entity																																																																																																																													
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description																																																																																																																											
1202	18	2202	9	Claims in excess of 20																																																																																																																											
1201	84	2201	42	Independent claims in excess of 3																																																																																																																											
1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																											
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																											
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																											
SUBTOTAL (2)		(\$ 18)																																																																																																																													
				Other fee (specify) _____  *Reduced by Basic Filing Fee Paid <b>SUBTOTAL (3)</b> (\$ 40)																																																																																																																											

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Daniel N. Fishman	Registration No. Attorney/Agent)	35,512	Telephone (720) 931-3000
Signature			Date	6/4/2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Yanling Qi  
Application No.: Not yet assigned  
Filed: Herewith Group No.: Not yet assigned  
Examiner: Not yet assigned

**FOR: METHODS AND STRUCTURE FOR SCSI2 TO SCSI3 RESERVATION  
PROTOCOL MAPPING**

**Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**CERTIFICATE OF MAILING  
via EXPRESS MAIL**

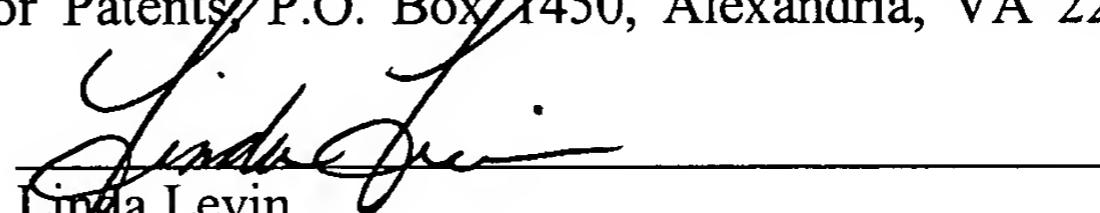
"Express Mail" labels number EL 820325864 US

Date of Deposit: August 6, 2003

I hereby state that the following *attached* papers

1. Utility Patent Application Transmittal (1 page)
2. Fee Transmittal in duplicate (2 pages)
3. Specification including Claims and Abstract (26 pages)
4. Figures 1-7 (7 pages)
5. Declaration for Utility or Design Patent Application (2 pages)
6. Power of Attorney or Authorization of Agent (1 page)
7. Recordation Form Cover Sheet Patents Only in duplicate (2 pages)
8. Assignment (1 page)
9. Certificate of Mailing (1 page)
10. Return Postcards (2)

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10, on the date indicated above and is addressed to: Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Linda Levin